



UNITED STATES PATENT AND TRADEMARK OFFICE

 COMMISSIONER FOR PATENTS  
 UNITED STATES PATENT AND TRADEMARK OFFICE  
 WASHINGTON, D.C. 20231  
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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/905,615	07/13/2001	Gyudong Kim	19570-06206

CONFIRMATION NO. 3715

 00758  
 FENWICK & WEST LLP  
 TWO PALO ALTO SQUARE  
 PALO ALTO, CA 94306

## FORMALITIES LETTER



\*OC00000006474090\*

Date Mailed: 08/27/2001

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

*Filing Date Granted*

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 130.

*A copy of this notice **MUST** be returned with the reply.*

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

10/05/2001 BABRAHA1 00000078 09905615

01 FC:105

130.00 OP



Section 8  
PATENT #3

IN THE UNITED STATES

PATENT AND TRADEMARK OFFICE

APPLICANT(S): Gyudong Kim et al.  
APPLICATION NO.: 09/905,615  
FILING DATE: July 13, 2001  
TITLE: System and Method for Measuring Pseudo Pixel Error Rate  
EXAMINER: Unassigned  
GROUP ART UNIT: Unassigned  
ATTY. DKT. NO.: 19570-06206

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Box Missing Parts, Commissioner For Patents, Washington, D.C. 20231, on the date shown below:

Dated: Sept 19, 2001

By: Greg T. Sueoka

BOX MISSING PARTS  
COMMISSIONER FOR PATENTS  
WASHINGTON, D.C. 20231

RESPONSE TO NOTICE TO FILE MISSING  
PARTS OF APPLICATION

SIR:

Responsive to the Notice to File Missing Parts dated August 27, 2001 received in the above-identified patent application,

☒ Enclosed are:

- ☒ a copy of the Notice to File Missing Parts;
- ☒ an original, signed Declaration;
- ☐ an original, signed Power of Attorney;
- ☐ an Application Data Sheet;
- ☒ payment in the amount of \$ 130.00 for the
- ☐ application filing fee;

☐ fee for additional claims; and

☒ missing parts surcharge.

☐ Other

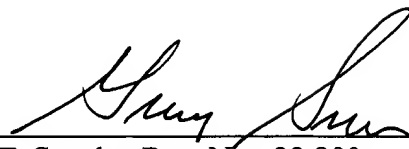
☐ Applicant claims small entity status under 37 C.F.R. § 1.27.

Respectfully submitted,  
Gyudong Kim et al.

Dated: \_\_\_\_\_

Sept. 19, 2001

By: \_\_\_\_\_



Greg T. Sueoka, Reg. No.: 33,800

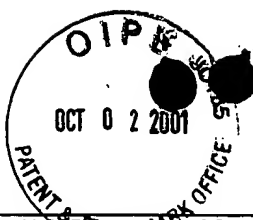
Fenwick & West LLP

Two Palo Alto Square

Palo Alto, CA 94306

Tel.: (650) 858-7194

Fax.: (650) 494-1417



PTO/SB/17 (10-00)(modified)  
Approved for use through 09/29/01, OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

0002/PTO(modified)  
Rev. 10/2000

U.S. Department of Commerce  
Patent and Trademark Office

## FEE TRANSMITTAL

### TOTAL AMOUNT OF PAYMENT

Subtotal (1) + Subtotal (2) + Subtotal (3) = **(\$ 130.00)**

### Complete if Known

Application Number	09/905,615
Filing Date	July 13, 2001
First Named Inventor	Gyudong Kim et al.
Group Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	19570-06206

### METHOD OF PAYMENT

### FEE CALCULATION (continued)

#### 1. The Commissioner is hereby authorized to:

- ☐ Charge the indicated fees to the below mentioned deposit account.
- ☒ Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account. <sup>1</sup>
- ☐ Applicant claims small entity status  
See 37 CFR 1.27

Deposit Account Number: 19-2555

Deposit Account Name: FENWICK & WEST LLP

A Duplicate Copy of this authorization is attached

#### 2. ☒ Payment Enclosed:

☒ Check ☐ Credit Card ☐ Other

### FEE CALCULATION (fees effective 10/01/2000)

#### 1. FILING FEE

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due
101/\$710	201/\$355	Utility Filing	<input type="text"/>
106/\$320	206/\$160	Design Filing	<input type="text"/>
108/\$710	208/\$355	Reissue	<input type="text"/>
114/\$150	214/\$75	Provisional Filing	<input type="text"/>

**SUBTOTAL (1)** **(\$ )**

#### 2. CLAIMS

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description
103/\$18	203/\$9	Claims in excess of 20
102/\$80	202/\$40	Independent claims in excess of 3
104/\$270	204/\$135	Multiple dependent claim
109/\$80	209/\$40	Reissue independent claims over original patent
110/\$18	210/\$9	Reissue claims in excess of 20 and over original patent

#### 3. ADDITIONAL FEES

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due
105/\$130	205/\$65	Surcharge - late filing fee or oath	<b>130</b>
127/\$50	227/\$25	Surcharge-late provisional filing fee or cover sheet	<input type="text"/>
147/\$2,520	147/\$2,520	For filing a request for reexamination	<input type="text"/>
115/\$110	215/\$55	Extension for response within first month <sup>1</sup>	<input type="text"/>
116/\$390	216/\$195	Extension for response within second month <sup>1</sup>	<input type="text"/>
117/\$890	217/\$445	Extension for response within third month <sup>1</sup>	<input type="text"/>
118/\$1,390	218/\$695	Extension for response within fourth month <sup>1</sup>	<input type="text"/>
128/\$1,890	228/\$945	Extension for response within fifth month <sup>1</sup>	<input type="text"/>
119/\$310	219/\$155	Notice of Appeal	<input type="text"/>
141/\$1,240	241/\$620	Petition to revive unintentionally abandoned application	<input type="text"/>
142/\$1,240	242/\$620	Utility Issue Fee (Or Reissue)	<input type="text"/>
143/\$440	243/\$220	Design Issue Fee	<input type="text"/>
122/\$130	122/\$130	Petitions to the Commissioner	<input type="text"/>
126/\$180	126/\$180	Submission of Information Disclosure Statement	<input type="text"/>
179/\$710	279/\$355	Request for Continued Examination (RCE)	<input type="text"/>
581/\$40	581/\$40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
146/\$710	246/\$355	Filing a submission after final rejection (37 CFR 1.129(a))	<input type="text"/>
149/\$710	249/\$355	For each additional invention to be examined (37 CFR 1.129(b))	<input type="text"/>

Other fee (specify): 10 Copies of patent

Other fee (specify):

**SUBTOTAL (3)** **(\$ 130.)**

(Col. 1)		(Col. 2)		(Col. 3)		Fee	Fee Due
For	No. of Existing Claims	minus*	Highest No. Previously Paid For	Extra**	x		
TOTAL		minus*	20 or		x		
INDEP		minus*	3 or 0		x		
[ ] First presentation of multiple dependent claim							

\* Subtract the greater number of Col. 2

\*\* If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3

**SUBTOTAL (2)** **(\$ )**

### SUBMITTED BY

Typed or Printed Name **Greg Sueoka**

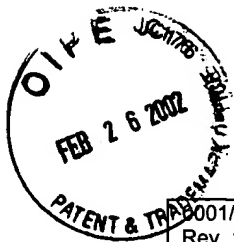
Signature

### Complete (if applicable)

Reg. Number **33,800**

Date **Sept. 19, 2001**

<sup>1</sup> Request for Extension of Time per 37 CFR 1.136 (a)(3) made hereby



2622

+

PTO/SB/21 (modified)  
Approved for use through xx/xx/xx, OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence during pendency of filed application)</i>	001/PTO Rev. 10/95	U.S. Department of Commerce Patent and Trademark Office	Application Number	09/905,615
			Filing Date	July 13, 2001
			First Named Inventor	Gyudong Kim
			Group Art Unit Number	2622
			Examiner Name	Not Yet Known
Total Number of Pages in This Submission		3	Attorney Docket Number	19570-06206

RECEIVED

MAR 05 2002

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed	<input type="checkbox"/> Issue Fee Transmittal
<input checked="" type="checkbox"/> Return Receipt Postcard	<input type="checkbox"/> Letter to Chief Draftsperson
<input type="checkbox"/> Response to Notice to File Missing Parts	<input type="checkbox"/> Formal Drawing(s): [ ] Sheet(s) of Figure(s) [ ]
<input type="checkbox"/> Assignment & Recordation Cover Sheet	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Declaration	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Application Data Sheet	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Information Disclosure Statement & PTO-1449 <input type="checkbox"/> Copies of IDS Cited References	<input checked="" type="checkbox"/> Request to Withdraw
<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/>
<input type="checkbox"/> Request for Correction of Recorded Assignment	<input type="checkbox"/>
<input type="checkbox"/> Amendment/Response: [ ] Page(s) <input type="checkbox"/> After Final	<input type="checkbox"/>
<input type="checkbox"/> Status Request	<input type="checkbox"/>
<input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/>

Technology Center 2600

REMARKS:

**SIGNATURE OF ATTORNEY OR AGENT**

Signature:			
Attorney/Reg. No.:	Greg T. Sueoka, Reg. No. 33,800	Dated:	2/13/02

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service pursuant to 37 CFR 1.10.

Signature:			
Typed or Printed Name:	Greg T. Sueoka	Dated:	2/13/02
Express Mail Mailing Number (optional):			